IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest,

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

Indexed	
Audited	
Checked	
Computer	

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

F	
IGOV	
Name of Department or Office 1007 E Grand Aye	Dan Marinage LA 50310
Mailing Address	Des Moines, IA 50319 City, State, Zip Code
4515) 725-3516 Area Code & Telephone No.	
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFI	OE.
Michael Boal	<u>UC:</u>
Name	
Hollion Add - 18 Pg	
Malling Address (if different from above) michael.boal@iowa.gov	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)
DONOR OF CIET OF PROJECT	, and one from above)
DONOR OF GIFT OR BEQUEST:	
Nathan Hussey, Iowa Youth Ministries	
Name	
Nathan Hussey, President	
Mailing Address City, State, Zip Code	20 Dec 2018 \$15.00
515-266-9319	Date of Gift or Bequest Amount/Value*
Area Code & Telephone Number	'value is defined as 'fair market value" of item as determined by
Email Address (optional)	receiving department or office. If no value mark "0.00".
cinali Address (optional)	
Provide a description of the gift or bequest and purpose thereof:	
Popcorn	
•	
Criteria to use this form:	
Receipt of any gift or bequest that is received by any department of the s	late or received by the Governor on habatt of the atota
	the state.
atement of Affirmation:	
Makes 1 Dec 1	

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I. Michael Boal affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

M w B w C

12/20/2017 W
Date